INSPECTOR GENERAL ACTION REQUEST

For use of this form, see AR 20-1; the proponent agency is the Office of The Inspector General and Auditor General.

DATA REQUIRED BY THE PRIVACY ACT OF 1974

AUTHORITY:

Title 10, USC, Section 3039.

PRINCIPAL PURPOSE: To secure sufficient information to make inquiry into the matters presented and to provide a response

to the requestor(s) and/or take action to correct deficiencies.

ROUTINE USES:

Information is used for official purposes within the Department of Defense; to answer complaints or respond to requests for assistance, advice or information; by Members of Congress and other Government agencies when determined by The Inspector General and Auditor General to be in the best interest of the Army; and in certain cases in trial by court martial other military matters as authorized by the Uniform Code of Military Justice.

DISCLOSURE OF THE SOCIAL SECURITY NUMBER AND OTHER PERSONAL INFORMATION IS VOLUNTARY. HOWEVER,

ACCOMPLISHMENT OF THE R					
LAST NAME - FIRST NAME - MIDDI	LE INITIAL	GF	RADE	SSN	DUTY TELEPHONE
COMPLETE PRESENT MILITARY AD	DRESS (If no military address, sta	ate current civilian addres	s, including	Zip Code.)	
SPECIFIC ACTION REQUESTED What do you want the IG to	do for you?				
INFORMATION PERTAINING TO TH Do you have supporting doc	IS REQUEST (Use additional shee umentation?	ats if necessary; list inclos	aures if appli	icable.)	
Have you asked for assistance	e from any other agencies	es?			
Is your chain of command av	ware of the problem?				
What is your status (Active l	Duty T10/T32, M-Day)?				
Any other pertinent informat	tion:				
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This information is submitted for conditions considered detriment any statements which are prove	ital to the efficiency or reput	utation of the Army.	correcting . I fully u	g injustices affec understand that I	ting individual, or eliminating may be held accountable for
DATE (YYYYMMDD)	SIGNATURE				